LICENSE NUMBER 729641

August 5, 2005

Mr. Nhan Bao

California Regional Water Quality Control Board Los Angeles Region 320 West 4th Street, Suite 200 Los Angeles, CA 90013

RE: King's Auto Repair

12005 South Street Artesia, California Report of Well Destruction

Dear Mr. Bao:

On August 3 and 4, 2005, Atlas Environmental Engineering, Inc. (ATLAS) observed the well destruction of six (6) groundwater monitoring wells (MW-1 through MW-6) for the King's Auto Repair property located at 12005 South Street, Artesia, California. Duxbury Drilling, a Licensed C-57 well driller, was contracted to destroy the groundwater monitoring wells. Destruction activities were performed in accordance with permit issued on July 26, 2005 by the Mountain & Rural Water, Sewage and Subdivision Program of the Los Angeles County Department of Health Services. **Figure 1** attached depicts the location of the former wells. The wells were destroyed by over drilling and removing of all PVC casing and pressure grouting as stated on the issued permit. The bentonite grout was injected into the drilled boring. A copy of the well destruction permit is included in **Appendix A**. This report is being submitted by ATLAS at your request and as authorized by Mr. Norman Shafer. If you have any questions, please contact me at (714) 890-7129.

Sincerely,

ATLAS ENVIRONMENTAL ENGINEERING, INC.

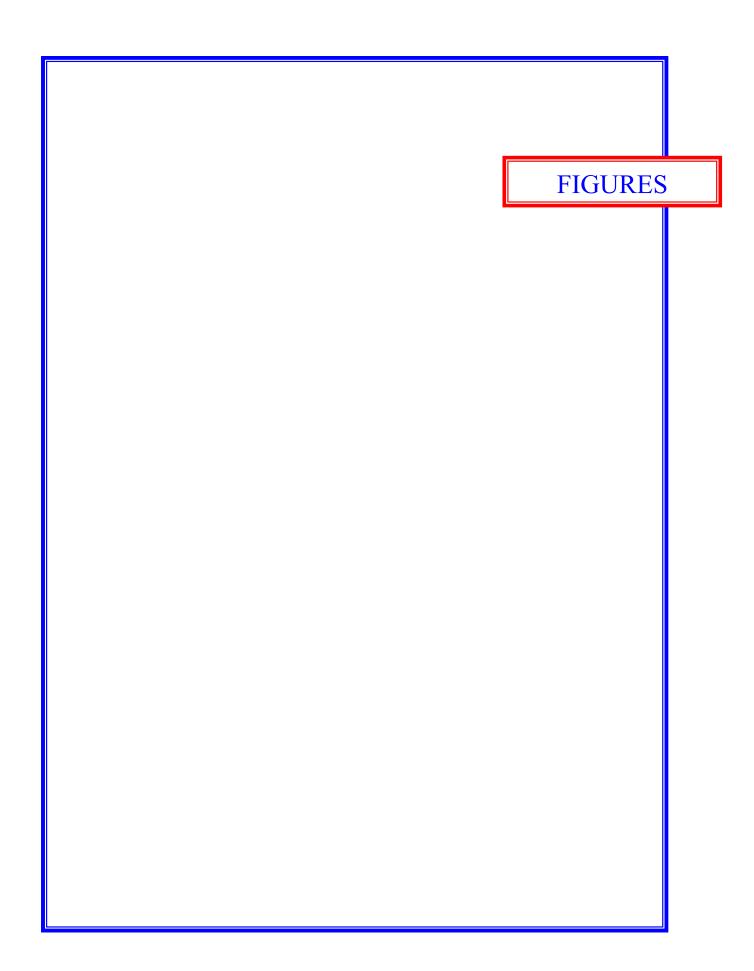
Karen Blanchard Project Geologist

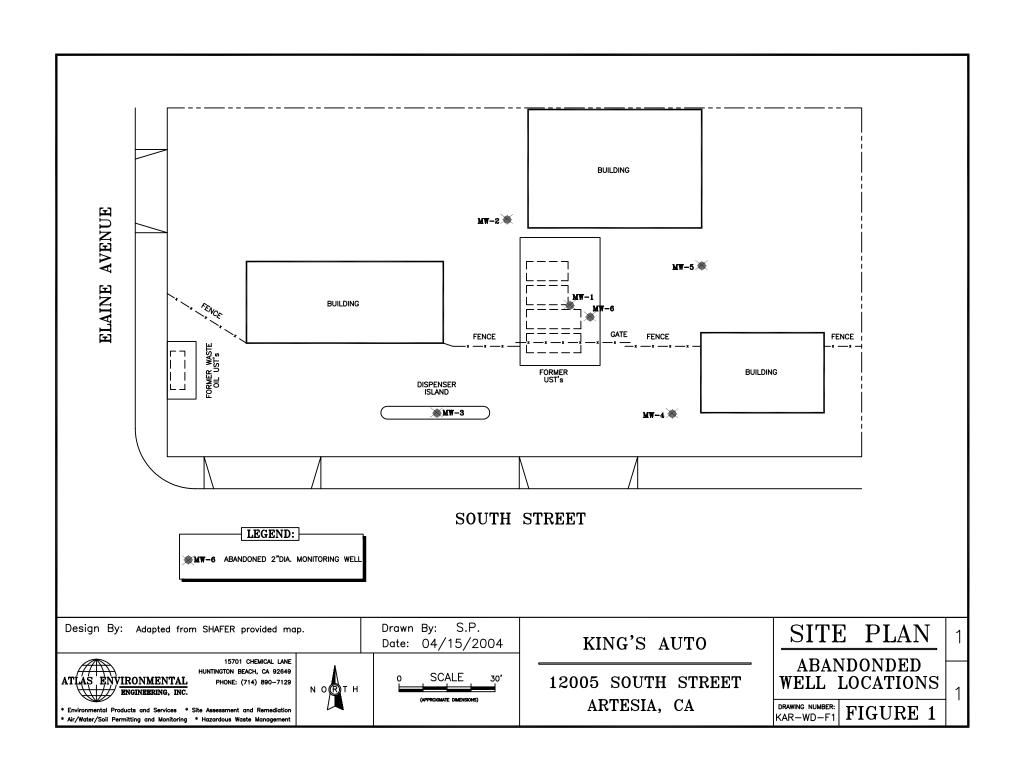
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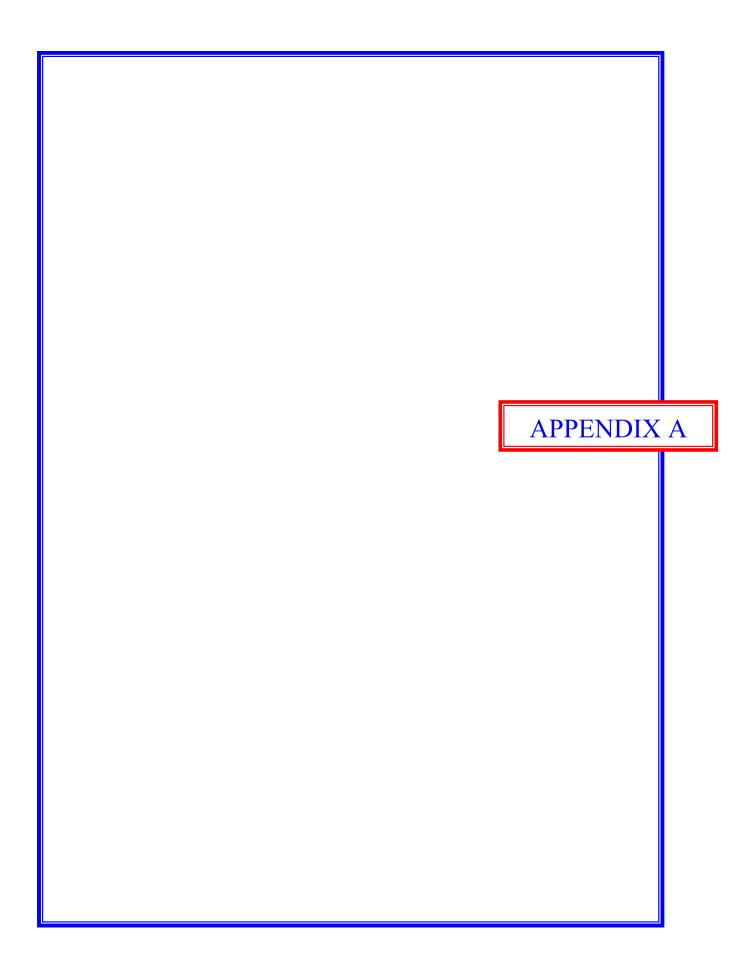
cc: Mr. Robert Hughes, LA Mountain and Rural Water Program (w/1 enclosure)

Mr. Norman Shafer, King's Auto Repair (w/1 enclosure)

Mr. Carl Sjoberg, LACDPW (w/1 enclosure)







W	ELL PERMIT APPLICATION - NOI ATER & SEWAGE / MOUNTAIN & RURAL PROGRAMS - ENVIR 50 COMMERCE DRIVE, BALDWIN PARK, CA 91706 (626) 430-5	ON-PRODUCTION WELLS RONMENTAL HEALTH DIVISION 5380 FAX (626) 813-3016  DATE:
	NEW WELL CONSTRUCTION RECONSTRUCTION OR RENOVATION DECOMMISSIONING OTHER:	MONITORING HEAT EXCHANGE CATHODIC OTHER (Specify): INJECTION EXTRACTION
CATION	SITE ADDRESS 12005 South Street	CITY ZIP CODE
WELL LOCATION	NO. OF WELLS IN EACH PARCEL:	Section 34 Map Book Page/ Grid G2
	Type and Size of	Company A LIAS Englishmental
WELL STRUCTURE	Production Casing  Sanitary / Annular Scaling Material	Contact Person Karen Blanchard
WELLST	Depth of Sanitary / Annular Seal	AUNITYTON BELLET ) (A
	Conductor Casing Seal	IF WELL AND GEOLOGIC CONDITIONS ENCOUNTERED IN THE FIELD ARE
NC	Well Owner	FOUND TO DIFFER FROM THE SCOPE OF WORK PRESENTED TO THIS OFFICE, WORK PLAN MODIFICATIONS MAY BE REQUIRED
OWNER / DRILLER INFORMATION	Address  City / Zip Code	DISPOSITION OF PERMIT (Department Use Only) THIS PERMIT IS CONSIDERED COMPLETE WHEN THE WORK PLAN IS
ER INF	Telephone	APPROVED AND WHEN THE WELL COMPLETION LOG IS RECEIVED. NO WELL CONSTRUCTION OR DECOMMISSIONING CAN BE INITIATED WITHOUT THE WORK PLAN APPROVAL FROM THIS DEPARTMENT.
R / DRIL.	Well Driller Address	-WORK PLAN APPROVAL
OWNE	City / Zip Code	Date - 36-05 REHS Labert Muches 20
	C-57 License No. 67459/	Conditions
	Weil Depth Or (	Kemore   Prendrill PVC casing
	log/records 25 teet.	to bottom
ONING	Assessment Overdrill + pressur	regrowt Pressure grout from bottom
WELL DECOMMISSIONING	Depth and Number of Perforations Screened from 5 to 25'	to top with the use of tremie
	Type of Perforations  Size of Perforations  Size of Perforations	Sper
	Type and Amount of Sealant Coment Coment	
	Method of Upper Seal Pressure Application Concrete	
the Consi	eby agree to comply in every respect with all the regulations of the laty Environmental Health Division and with all ordinances and la County of Los Angeles and the State of California pertaining to we truction, reconstruction and decommissioning. Upon completion of and within thirty days thereafter, I will furnish the Environmenta	ell of the al
Heal well,	th office with a completion log of the well giving date drilled, dept perforations in the casing, and any other data deemed necessary t ity Environmental Health Division.	th of the
Applicant's Signature		PERMITISSUED  The well log must be submitted to this Department prior to issuance of the final approval
Applio Telepi	unt Name: (PRINT) Keven Blarcherd	Date REHS
A668-A	(a)(300) fax (714) 890-7149	